



THE CITY OF SAN DIEGO

CANDIDATE FOR PUBLIC SERVICE APPOINTMENT CITY OF SAN DIEGO

QUALIFICATIONS RESUME

Applicant's Name: _____	Business Affiliation: _____
Board or Commission: _____	Business Address: _____ (Including ZIP) _____
Home Address: _____ (Including ZIP) _____	_____
_____	Business Telephone No: _____
Telephone: _____	Email Address: _____
Length of Residence in City of San Diego: _____	Council District: (check one) 1 2 3 4 5 6 7 8
Are you a resident and a registered voter in the City of San Diego? YES NO	

Educational Background: _____ _____ _____	Occupational Experience: _____ _____ _____
Professional or Technical Organization Memberships: _____ _____ _____	Civic or Community Experience, Membership or Previous Public Service Appointments: _____ _____ _____

Experience or Special Knowledge Pertaining to Area of Interest: _____

Signature _____ Date _____

PLEASE FEEL FREE TO PROVIDE ADDITIONAL INFORMATION OR LETTERS OF ENDORSEMENT.
THANK YOU FOR YOUR INTEREST IN SERVING OUR CITY GOVERNMENT.

Please mail to: The Office of the City Clerk, 202 C Street, MS2A, San Diego, CA 92101, Attn: Boards and Commissions